

# DIMO INSTRUCTOR VOLUNTEER SELF-NOMINATION FORM

## APPLICANT INFORMATION

<b>Name (Last, First, MI):</b>		
<b>Service Branch/Agency:</b>		<b>Grade/Rank:</b>
<b>Mil/Med Specialty:</b>		<b>Specialty Code:</b>
<b>Unit/Office Symbol:</b>	<b>Email:</b>	
<b>Unit Address:</b>		
<b>City/Base:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Phone (DSN):</b>	<b>Phone (Comm):</b>	

## DIMO COURSE(S)

Select courses you feel you can teach by checking the course box(es). Visit our website ([www.dimo.af.mil](http://www.dimo.af.mil)) view course synopses.

RESIDENT COURSES – SAN ANTONIO, TEXAS		FORCE HEALTH PROTECTION / PUBLIC HEALTH RESILIENCY	
<input type="checkbox"/>	MASL D175052, Leadership Course in Biosecurity/Biosafety Planning and Implementation	<input type="checkbox"/>	MASL D309017, Leadership Course in Regional Disaster Public Health and Public Health System Management
<input type="checkbox"/>	MASL D175134, Seminar on Gender-Based Violence and Women's Health	<input type="checkbox"/>	MASL D309020, Biological Weapons and Emerging National Security Threats
<input type="checkbox"/>	MASL D175466, Executive Healthcare Resource Management	<input type="checkbox"/>	MASL D309040, Leadership Course in HIV/AIDS Program Development
<input type="checkbox"/>	MASL D175467, HIV/AIDS Planning and Policy Development	<input type="checkbox"/>	MASL D309053, Operational Preventive Medicine in Support of Deploying Forces
DISASTER PLANNING & CONSEQUENCE MANAGEMENT		<input type="checkbox"/>	MASL D309058, Biosecurity & Biosafety: Planning for National Protection
<input type="checkbox"/>	MASL D309011, Leadership Course in Regional Disaster Response and Trauma System Management	<input type="checkbox"/>	MASL D309059, Healthcare Infection Control Planning for Pandemic Management
<input type="checkbox"/>	MASL D309018, Responding to the Unthinkable: Managing the Mental Health Consequences of Disaster	<input type="checkbox"/>	MASL D309060, Prevention with Positives Clinician Training
<input type="checkbox"/>	MASL D309024, Critical Lifesaving Skills for First Responders	<input type="checkbox"/>	MASL 309069, Infection Control, Hospital Epidemiology and Waste Management
<input type="checkbox"/>	MASL D309025, Surgical Trauma Response Techniques	<b>HEALTH SYSTEM MANAGEMENT</b>	
<input type="checkbox"/>	MASL D309041, Disaster Planning – Basic	<input type="checkbox"/>	MASL D309028, Health Resource Management
<input type="checkbox"/>	MASL D309045, Trauma Nursing	<input type="checkbox"/>	MASL D309042, Health Systems Development & Best Practices
<input type="checkbox"/>	MASL D309047, 21 <sup>st</sup> Century Warrior: Responding to the Emotional Trauma of Combat/Terrorism	<input type="checkbox"/>	MASL D309044, Nursing Administration
		PATIENT TRANSPORT & EVACUATION	
<input type="checkbox"/>	MASL D309050, Mobile US EMEDS Contingency Hospital Training Course	<input type="checkbox"/>	MASL D309022, Critical Care in Aeromedical Transport
<input type="checkbox"/>	MASL D309055, Mass Casualty Response for Primary Care Providers	<input type="checkbox"/>	MASL D309046, Basic Aeromedical Evacuation Principles
<input type="checkbox"/>	MASL D309057, Disaster Planning Course (Advanced): Developing National Emergency Management Capability	<input type="checkbox"/>	MASL D309051, Aerial Patient Movement Doctrine
<input type="checkbox"/>	MASL D309061, Leadership Program in Dentistry and Dental Health System Management		
<input type="checkbox"/>	MASL D309068, Basic First Responders Course (Non-Medics)		
<input type="checkbox"/>	MASL D309070, Emergency Management Seminar for Senior Leaders		

## EDUCATION

Please indicate degree(s)/certification(s) earned, school/institution and date earned

Degree/Certification	School/Institution	Date

Please describe your current and last two jobs; provide dates, unit, duty title and a brief description of your duties/responsibilities.

**Current Unit:**

**Dates:**

**Duty Title:**

**Duties/Responsibilities:**

**Previous Unit:**

**Dates:**

**Duty Title:**

**Duties/Responsibilities:**

**Previous Unit:**

**Dates:**

**Duty Title:**

**Duties/Responsibilities:**

### DEPLOYMENTS/INTERNATIONAL EXPERIENCE

Please describe any deployment experience or experience working with foreign nationals.

### TEACHING EXPERIENCE

Please briefly describe your teaching experiences. Also, list any teaching awards or recognition.

### FOREIGN LANGUAGE SKILLS

**Language**

**Proficiency (Limited/Conversational/Technical)**

**DLPT Scores? Date**

### REFERENCES

Please provide names and contact information for three professional references.

**Name**

**Email**

**Phone**